DATENT	ADDI ICATIC	N FEE DETERMIN	VATION RECORD
PAICNI	APPLICATION.	IA LEE DETENMIN	MATION DECOND

Effective October 1, 2001

Application or Docket Number

10084798

CLAIMS AS FILED - PART I (Column 1) (Column 2)					mn 2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS		26				ſ	RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			2 minus 20=		*			X\$ 9=	590	ppR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* 0			X42=	1-6	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT						Ì	+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column					column 2	L	TOTAL	424		TOTAL		
CLAIMS AS AMENDED - PART II									.961	ter ge	OTHER	THAN
(Column 1)				(Colu		(Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***				X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	TCLAIM		l	+140=		OR	+280=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	A	ADDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAININGAFTER_ AMENDMENT		HIGI NUM PREVI	HEST MBER	PRESENT		RATE-	ADDI- TIONAL FEE		RATE_	_ADDI- _TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	TCLAIN		<b>ا</b> ا	+140=		OR	+280=	
							L .	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-		X42=		1	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ∤			OR		
	If the entry in colu	ımn 1 je loce than t	the entry in co	lumn 2 wri	te "N" in o	olumn 3		+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE											
I		nber Previously P					er fou	und in thè an	propriate bo	x in co	olumn 1.	